

# THE *Canadian Hospital*

*A Monthly Journal for Hospital Executives*



Toronto, Can.

*The Edwards Publishing Company*

October, 1927

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*In This Issue—*

Montreal Women's General Hospital  
The Use and Abuse of Equipment  
Collections Commenced with Admittance  
News of Hospitals and Staffs



*One pound of absorbent cotton and one pound of Cellucotton Absorbent Wadding.  
The latter's greater bulk gives you more dressings per pound.*

## To hospitals this fine absorbent brings 5 specific savings

**N**OWHERE must costs be watched so closely as in the hospital. And initial cost is not all that must be considered. Ultimate cost is much more important.

That's why thousands of hospitals who have used Cellucotton Absorbent Wadding for years, will buy no other absorbent. These hospitals have had ample opportunity to watch costs over a long period of time and they know that Cellucotton Absorbent Wadding brings not one, but *five* specific savings.

For, if you base economy on initial cost, remember this—Cellucotton Absorbent Wadding costs less than other good absorbents.

If you figure savings on the number of dressings that can be made pound for pound from different absorbents—compare the bulk of one pound of Cellucotton Absorbent Wadding with one pound of absorbent cotton (photograph above).

And—if you look to savings in material for savings in money—think of these points:

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greater absorbency permits the use of smaller dressings in many cases;

—it readily separates into layers. There is no unnecessary waste of material;

—its use conserves gauze and other expensive materials.

Yet Cellucotton has found favor not for economy alone. Its remarkable absorbency, together with its lightness and purity, make it invaluable as a surgical dressing material. It is, in fact, widely recognized as the most useful absorbent ever known.

And now, a still greater advantage! Cellucotton Absorbent Wadding may be bought already cut into the sizes most needed by hospitals! No more tedious labor for nurses, cutting up material for dressings! No more lack of cut material in crucial moments!

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Maternity Pads  
Abdominal or Combination Dressings  
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Dressings for all other drainage cases  
Defecation Pads

*{Always look for the blue, easily-identified wrapper, stamped with the trade-marked name "Cellucotton Absorbent Wadding"}*

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As a physician you naturally deal with definite quantities and strengths in your prescriptions. When you prescribe Kellogg's ALL-BRAN to combat faulty elimination, you can rely upon the definite results you anticipate being accomplished. You can prescribe with confidence.

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The above recent “STANDARD” installations represent the last word in kitchen design and equipment in keeping with progressive institutional methods.

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Perhaps you too have a kitchen problem. The coupon places our experience at your service without obligation.

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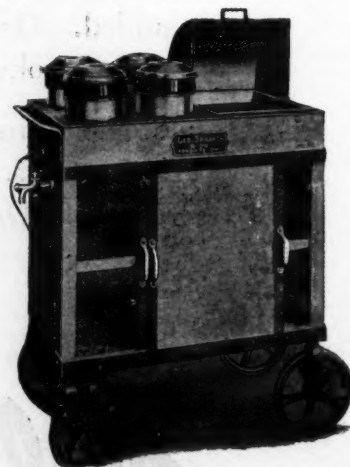
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 119 Church St.  
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Gentlemen:  
 Please send us information on the following “STANDARD” Kitchen Equipment. This does not place us under any obligation.

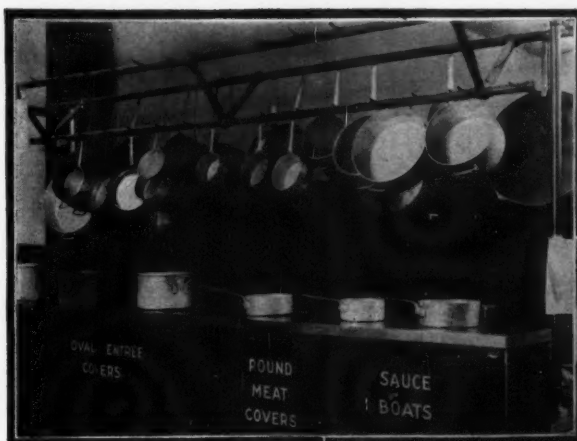
☐ Send copy of catalogue.  
☐ Have representative call when next in district.

Hospital.....  
 Town or city.....Prov.....



Above is model No. 98 Hospital Steam Table Truck. On the left is model No. 97 of slightly different construction.





The efficient kitchens of the Hamilton General Hospital, Hamilton, Ont., are exceptionally well equipped with "Wear-Ever" Aluminum Utensils and Steam-Jacketed Kettles, as the illustration shows.



## The Kitchens of the Hamilton General Hospital are well-equipped with "Wear-Ever" Aluminum

The large number of Canadian hospitals standardizing on "Wear-Ever" testify to the *ideal* properties of this famous Aluminum Kitchen Ware.

"Wear-Ever" Utensils will not rust or corrode, are unaffected by food acids or odors, are easy to keep clean, effect a noticeable saving in fuel, and will give years of service without repair expense.

*Write for particulars on "Wear-Ever" Kitchen Ware and Steam-Jacketed Equipment for your institution.*

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## Aluminum Kitchen Ware

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THE principles of design of Victor apparatus for deep roentgenotherapy have been proved fundamentally correct. This statement is borne out by the experience of scores of users over a period of years.

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Victor Service thru 33 Direct Branches in the U. S. and Canada, and thru its extensive service facilities in foreign countries, is an important consideration in apparatus of this nature. Let us refer you to Victor users in your locality, where you may obtain information first hand regarding these vital points.

*Literature on Request*

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MONTREAL—524 Medical Arts Bldg.

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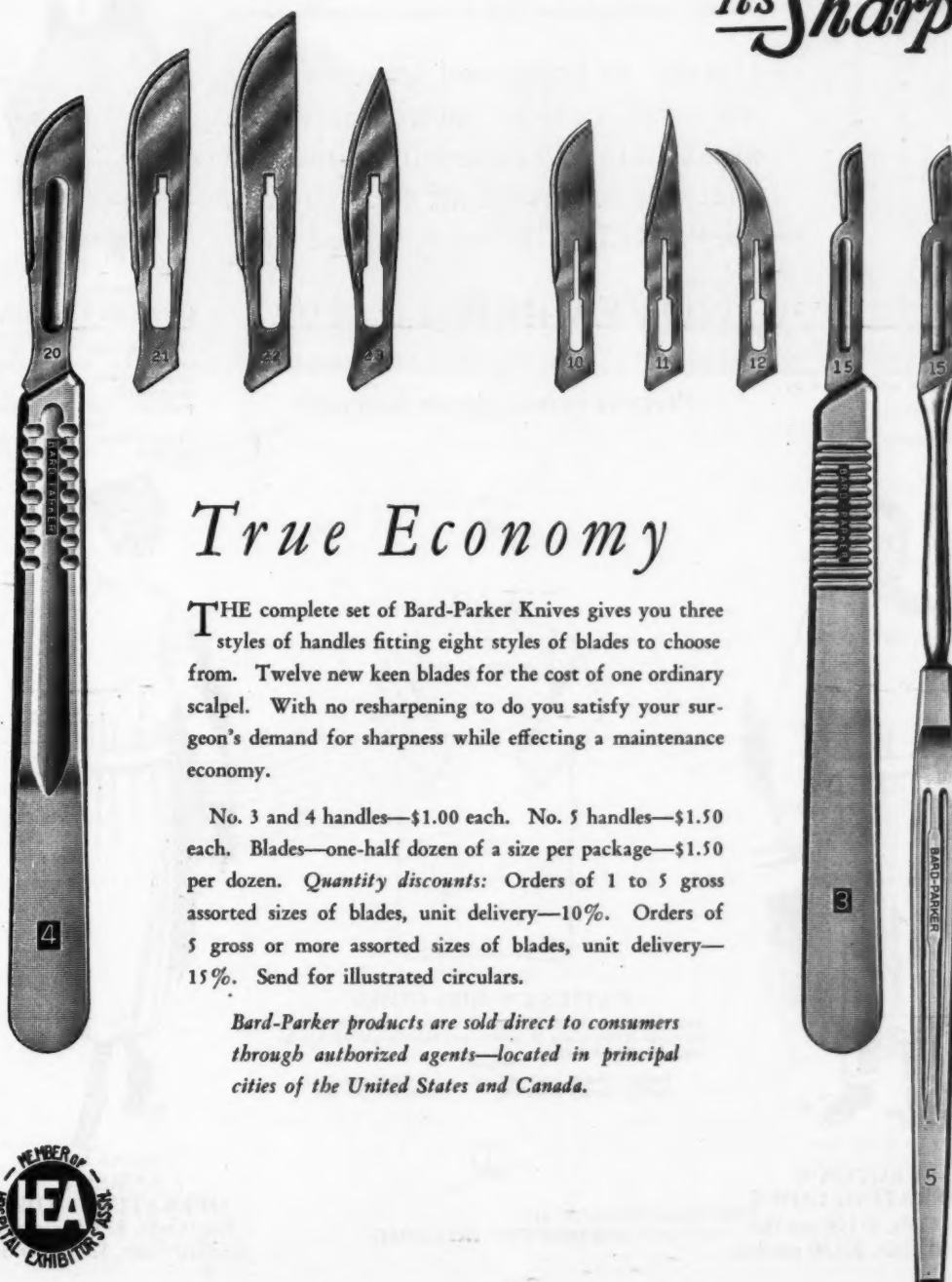
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<b>X-RAY</b> Diagnostic and Deep Therapy Apparatus. Also manufacturers of the Coolidge Tube		<b>PHYSICAL THERAPY</b> High Frequency, Ultra-Violet, Sinusoidal, Galvanic and Phototherapy Apparatus
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## True Economy

THE complete set of Bard-Parker Knives gives you three styles of handles fitting eight styles of blades to choose from. Twelve new keen blades for the cost of one ordinary scalpel. With no sharpening to do you satisfy your surgeon's demand for sharpness while effecting a maintenance economy.

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*Bard-Parker products are sold direct to consumers through authorized agents—located in principal cities of the United States and Canada.*



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Style No. 300

### HOUSE DOCTOR'S COAT

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Coat .....\$25.50 doz.  
Pants to match \$24.00 doz.

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Owing to increased cost of raw material, cotton particularly, we are reluctantly compelled to advise that our prices on all HOSPITAL APPAREL will be increased on

**NOVEMBER 1st, 1927**

*Present prices shewn herewith*



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### ORDERLY'S COAT

Made of good quality bleached duck, plain white or striped, medium high collar, three pockets, five detachable buttons, neat pointed cuff on sleeve.

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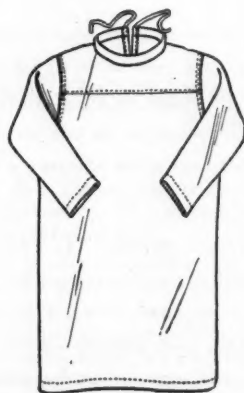
Plain white.....\$20.00 doz.  
Striped.....\$21.00 doz.



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### SURGEON'S OPERATING GOWN

Reg. Cuffs, \$19.00 per doz.  
Knitted Cuffs, \$21.00 per doz.



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### PATIENT'S BED GOWN

Standard length 40 in., opens down back, with linen buttons or tie tapes if preferred, reinforced with yoke both back and front.

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Indian Head, unbleached.....\$9.00 per doz.  
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UNCONDITIONALLY  
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The  
Vancouver  
General Hospital



THE VANCOUVER GENERAL HOSPITAL  
VANCOUVER, B.C.

April 15, 1927.

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Board of Directors

Mr. C.L. McDonald,  
District Manager  
Otis-Fensom Elevator Ltd.,  
Vancouver, B.C.

Dear Sirs:

Our new Infectious Diseases Hospital has been in occupation since early in the New Year and I expect that you will be pleased to learn that your Otis-Fensom elevator is proving a satisfactory feature. The micro-levelling is now calling forth commendation from all those who work in this building. The exact levelling of the elevator with the floor has not only eliminated a great deal of noise from the passage of trucks and stretchers but adds materially to the comfort of patients who are being transferred.

Yours faithfully,  
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F.C. Bell, M.D.  
General Superintendent.

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the Best  
Can Be  
Considered  
for Hospital  
Service

Where life hangs  
in the balance,  
where dependa-  
bility and smooth  
operation are  
essential,  
Otis-Fensom  
micro-levelling  
elevators  
are used.

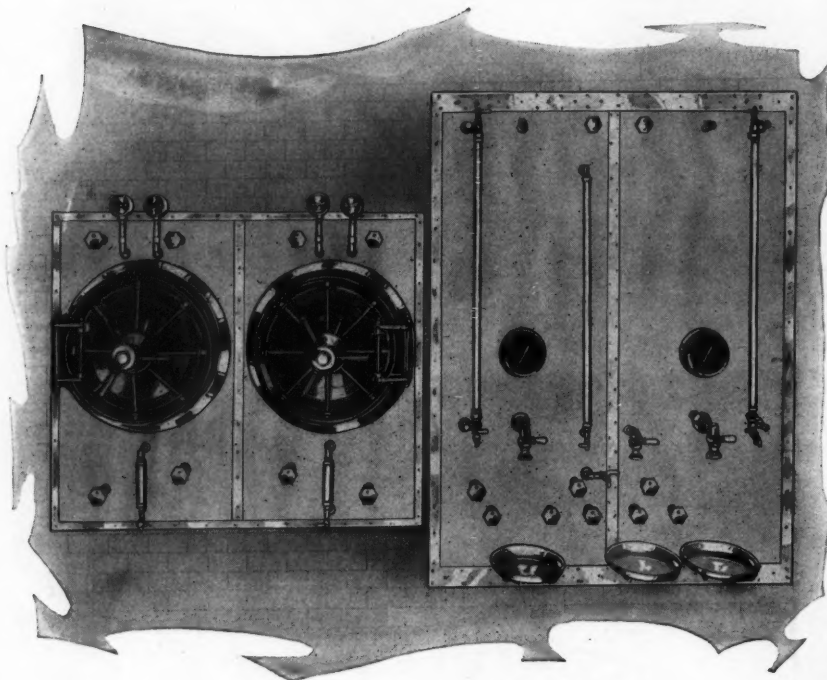
Now standard equipment  
for the best hospitals.

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OFFICES IN ALL PRINCIPAL CITIES

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## Beauty is Another Asset with Castle Built-in Sterilizers



2 Castle autoclaves and  
a pair of water steril-  
izers in combination.

*Installed in Women's  
Hospital, Montreal, P.Q.*

The tendency in modern equipment is toward beauty of line and dignity of appearance—combined of course with operating efficiency and sturdy construction.

Castle sterilizers have long been famous for their rigid adherence to correct principles in technique and they are noted for their heavier construction. Now to these points of excellence Castle engineers add good looks in installation.

Note the simple beauty of this recessed battery of sterilizers. Consider how it adds to the neatness of the sterilizing room—to say nothing of promoting cleanliness, and keeping sterilizing room cool.

This recessing may be behind monel metal panels, as shown, or within a tiled wall, as preferred. Our planing department will gladly submit sketches and estimates on any such installation. Write freely without fear of obligation or of annoying solicitation.

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# THE Canadian Hospital

*Published in the interests of Hospital Executives*

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Vol. 4

OCTOBER, 1927

No. 10

## Consider the Fire Hazard

The week of October 9 to 15 has been chosen by the Ontario Government as an appropriate time to consider and remedy, as far as possible, the conditions that cause fires.

A booklet has been issued by the Department of the Attorney-General in which is included the following information and advice:

Eight out of every ten fires could be prevented by promptly correcting hazardous conditions, such as disorder, accumulations of rubbish and litter, defective heating equipment, faulty construction and the exercise of care, order and cleanliness.

Oily waste or rags used in polishing furniture or cleaning machinery, if left around the premises, are liable to cause a fire from spontaneous ignition, due to the rapid oxidation of oil, which raises the temperature sufficiently to make it burst into flame. An oily mop has been known to ignite spontaneously within an hour.

There is no more efficient way of keeping down to a minimum the fire waste than by instituting a regular and systematic inspection of all buildings and their surroundings.

Upon the discovery of fire, after giving the alarm to the inmates of the building, you should summon the Municipal Fire Department and then make prompt and effective use of the First Aid Equipment at hand.

A small capital expenditure is sometimes necessary to put into effect a new process or method, when scrapping the old or obsolete one for the purpose of

eliminating waste. The same principles are underlying whether running the business of a city or a nation, and in no phase of practical life is this fact more apparent and more needful than in solving the fire waste problem.



## Ontario Hospital Association Convention

The Executive Committee of the Ontario Hospital Association have announced that the 1927 Convention will be held at London, Ontario, October 20 and 21. The local Committee on Arrangements, headed by Dr. G. G. Clegg, have secured the Auditorium of the Medical School of the University of Western Ontario for their meetings. The Medical School adjoins Victoria Hospital, where demonstrations will be held and where all departments, including the recently constructed Nurses' Residence and other new extensions, will be open for inspection.

The Programme Committee are completing a very full and interesting agenda which includes prominent speakers who will deal with matters of much importance to all Hospital Trustees and Administrators.

The usual Association Luncheon will be held at the new London Hotel and the Trustees' Section will hold a dinner and meeting.

It is the hope of the Executive that representatives from every hospital in Ontario will attend the Convention. Many matters of vital concern to all hospitals will be dealt with and a full representation is necessary to adequately deal with the many problems of finance and administration that call for collective and authoritative action.

The Ontario United Hospital Aids' Association will hold their Annual Convention at Victoria Hospital, London, on the two days previous to the Ontario Hospital Association meetings, which will enable members of each Association to attend the joint proceedings.



## A Campaign Against Preventable Disease

A campaign is being undertaken in Canada to raise \$500,000 to finance a three-year programme in order to "keep people out of the hospitals," as the Toronto "Daily Star" puts it.

The hospitals themselves appeal from time to time for funds, and there is no more worthy cause. But if it were possible to even partially empty them by the elimination of preventable disease, not only would the hospitals themselves require less help, but the human race would be vastly happier.

As it is, Canadians have made a capital investment of \$179,500,000 in hospitals, asylums and sanatoria. And forty per cent. of this investment, as well as forty per cent. of the annual upkeep of \$50,000,000, is attributed to "unnecessary" cases, the victims of preventable disease. It is estimated that preventable illness also accounts for loss of labour which costs the industrial life of Canada \$31,500,000 per year, while the economic loss through dislocation of business, hampering of production and the private expenditure for medical services and medicines accounts for another \$100,000,000. It is said that in 1924 there were over 26,000 preventable deaths in

Canada out of a total of 88,000. Actuarially considered, this meant a capital loss to the Dominion of nearly \$265,000,000.

There are ways in which these vast items of personal and national loss can be reduced. To prevent preventable disease is to wipe out the cost of it and the suffering which it entails. The campaign shortly to be inaugurated has this end in view. Under the name of social hygiene, an appeal will be made to Toronto for \$70,000 per year for three years to help empty the hospitals of Canada, not of the people now in them, but of those who are even now contracting the disease which will some day take them there. It is an appeal to which there should be a ready and generous response.

#### Canadian Booth at A.H.A. Convention

As a result of a meeting of the Canadian members of the American Hospital Association held at the Atlantic City Convention of 1926, an organization of Canadian members was formed under the chairmanship of Dr. G. G. Clegg, superintendent of Victoria Hospital, London, Ont.

Dr. Clegg has arranged for the 1927 Convention, which will be held at Minneapolis, October 10 to 14, a Canadian Headquarters' Booth which will be available as a meeting place for the Canadian members. A special luncheon has also been arranged, particulars of which will be published in the Convention Bulletin.

#### Institutions Using New Glass

A glass that permits the transmission of ultra-violet rays from natural sunshine will be used over a total space of 2,500 square feet in the south, east and west façades of the new Eagleville Sanatorium now under process of construction at Eagleville, Pennsylvania, says "Nation's Health."

In specifying the use of this new glass the architects state their belief that the difficult problem of affording the therapeutic benefits of whole sunshine to patients who are not always in condition to withstand exposure to the low temperature of outdoor sun baths is solved for sanatorium authorities. The experience of English and Irish institutions in the last two years with ultraviolet transmitting glass, an English discovery, was influential in the decision of the architects to adopt it for the building now under construction at Eagleville.

One of the most interesting experiments being carried on with this glass in America is that at Farmingdale, L.I., an institution for tuberculous cases, where the sanatorium is entirely glazed with the new glass. Experiments are also being conducted along this line in connection with the Columbia-Presbyterian Medical Centre, New York. The Sick Children's Hospital, Toronto, and other institutions are considering the use of this glass.

The transmission of "unskimmed" sunlight has been found to be of definite value in treatment of rachitic and pulmonary conditions as the ultra-violet rays, important in treatment of such conditions, do not penetrate through ordinary glass.

#### New Dentistry Course at Montreal General

Official inauguration of the first post-graduate course in dentistry ever offered at McGill took place at the Montreal General Hospital on September 21, with six graduate dentists entering upon a course of research and study which will occupy them for the next nine months.

There is a need for dentists in the Province of Quebec, where statistics show that there is only one dentist for every 5,000 of population, while it is considered essential that there should be a dentist for every 1,000 persons.

Each student is working in a different department at the hospital, an interchange being arranged every few weeks. At the end of the course each student will have completed five weeks of intensive work in the pathological laboratory at the Montreal General Hospital; five weeks in general anaesthesia and dental operations, including the use of ether, ethyl chloride and nitrous oxide; five weeks in dental surgery, and one week in the department of radiography, in addition to having attended a large number of lectures and special demonstrations.

Work will have been done in orthodontia and some 23 patients who have applied for treatment at the hospital will be treated by the dentists under the supervision of Dr. A. W. McLeland.

Dr. K. K. Beaton is to act as dental interne at the Montreal General Hospital and to take care of the emergency work there after hours. This marks a new institution at the hospital. He has already assumed his duties.

#### Nursery Schools Prove Valuable

In this day of working mothers the nursery school furnishes an ideal solution of the problem of caring for young children, says Ruth L. Frankel, who discusses the pros and cons of nursery schools in "Hygeia" for October.

Children from 18 months to two years old are taught by actual experience how to live in a group and how to care for themselves. Skilled teachers, nurses and dietitians show them how and what to eat, supervise their play and establish a healthful regimen in a perfect environment. They live in the open air, their furniture is specially made on a scale in which they are perfectly at home and in which they have freedom they seldom find in a home built for grown-ups.

But the nursery school embodies nothing that cannot be duplicated at home by the mother with leisure to devote to her child's rearing, Mrs. Frankel adds, in answer to mothers who wonder whether their children's best interests demand such a separation. A sunny porch, a box of playthings and a mother with sufficient ingenuity to deal with her child's problems will provide the creative atmosphere without sacrificing the home associations or bringing up a spoiled, helpless child.

MONTREAL, QUE.—Dr. Oscar Mercier, surgeon-in-chief of Notre Dame Hospital, has returned from a voyage to Europe.



**DR. A. HOWARD PIRIE**  
*of the Royal Victoria Hospital, Montreal*  
*President The American Roentgen Ray Society*



## MONTREAL WOMEN'S GENERAL HOSPITAL



*The First General Hospital for Women in Canada*



HE Women's General Hospital on Dorchester Street, Montreal, is practically completed. The building will have accommodation for 223 patients in private, semi-private and public wards, as well as providing for a complete outdoor service.

The most modern methods of hospital planning have been followed and all materials, down to the smallest detail of equipment, are of the best quality. Everything has been done with a view to maximum efficiency, economy in administration and comfort of the patient.

This hospital will mark a new departure, being the first general hospital for women in the Dominion, taking not only maternity cases, but also every type of disease—eye, ear, nose and throat, heart, stomach, skin, nerves, etc.

Every private room is equipped with wash basin with running hot and cold water, clothes closet and telephone connection. The public wards follow the latest hospital practice in that they will hold only six to eight beds. Patients will receive their food piping hot, as every floor has its own diet kitchen, receiving meals by electric dumbwaiter from the main kitchen in the semi-basement, from which the food is immediately transferred to a steam table where it and the plates are kept hot while trays are made up.

Three large operating rooms and two birth rooms are located on the top floor, receiving light from the northeast in addition to the up-to-date electric installations from the ceilings. A commodious solarium

is built on the southern side of the building, while on the roof a parapet has been erected, so that patients may be taken up on sunny days to enjoy the air and sunlight. The elevator shaft runs up to the roof and the doors of all rooms have been made wide enough to allow of the patients being wheeled out in their beds.

The private nursery in the maternity section of the hospital has the upper half walled in glass, so that admiring relatives and friends may see the infants. No one will be allowed in, so as to obviate as far as possible any danger of infection being carried to the new-born citizens.

A pathological and bacteriological laboratory is provided for, and also an X-ray department, the latter equipped by means of a donation of \$3,000 from P. R. Walters, of the Imperial Tobacco Company.

Every ventilator leads to the roof, ensuring pure air, warmed by means of surplus steam. Chutes will convey all waste to the incinerator from each floor, while others, for linen, connect with the laundry in the light, airy basement.

The most modern type of sterilizing plant has been installed in the east wing where are the operating rooms, the instrument room being close by. The kitchens are being fitted up with every sort of labour-saving device electrically run so as to save time and labour, and an extensive refrigerating system is installed. The heating plant has been thoroughly tested and there will, of course, be a resident engineer in charge.

The building is of as nearly fireproof construction as possible. The door frames throughout are of vanadium steel; the walls of concrete to a height of about 3 feet 6 inches, the upper portion being of plaster. The corridors and stairways will be decorated in buff and white, public wards in powder blue, while the private and semi-private rooms are done in Sahara sand and lettuce green.

Blanket closets on each floor are equipped with steam-heating devices which ensure blankets being warm. The same system is followed with regard to the baby clothing closets.

Other features include an incubator room, and isolation room for any baby who may develop a temperature, and an isolation ward with its own separate corridor for any woman or girl in similar circumstances.

The first three floors of the east wing constitute the nurses' quarters and the training school. The same method of construction has been followed here as in the wards, so that, when the hospital expands, patients may occupy this section while other accommodation would be supplied for the nurses. House doctors' quarters are on the fifth floor.

A dignified appearance is presented by the exterior of the hospital, with its portico of stone fronting a driveway. A special entrance on the right leads to the outdoor department, which contains clinics, doctor's office and social service department.

Careful planning on the part of the medical board has made it possible to build and equip this hospital

*Continued on Page 38*

Lines of  
real value

**EDDY'S**

ONLIWON CABINET

and

ONLIWON TISSUE  
TISSUE ROLLS  
SERVIETTES

"Onliwon" Tissue in an "Onliwon" Cabinet is a particularly neat and economical bathroom fixture. Real money value distinguishes this Eddy line just as it distinguishes Eddy Toilet Tissue Rolls and Paper Serviettes. The name "Eddy" is your guarantee.

THE E. B.  
**EDDY**  
CO., LIMITED  
Hull, Canada

This floor beauty and cleanliness  
possible in no other way —

A SMALL section of floor in your hospital, waxed and polished with a FINNELL Electric Floor Machine, would amaze you with its new beauty. Just as your operating room floor, scrubbed with a FINNELL, would present a surprising contrast to its present state, no matter how clean you believe it to be.

For the FINNELL, by its thoroughness and speed, puts hand cleaning methods to shame. Noiselessly, it polishes floors to lustrous beauty, or scrubs them free of dirt and discoloration. Linoleum, wood, tile, terrazzo, rubber, cork, etc.—the FINNELL leaves them cleaner, more beautiful, better preserved than ever before! It

covers over ten times as much floor area as the strongest man. Yet it is easy to operate, noiseless and cleans under beds, tables, chairs, etc. In a few months, it can save enough to repay its entire cost.

Let the FINNELL bring new cleanliness into your corridors, lavatories, offices, operating rooms, kitchens. Patients and staff alike respond to its cheering influence. Patronage prospers.

Do not buy any machine before seeing the FINNELL. Demonstration free. For details address



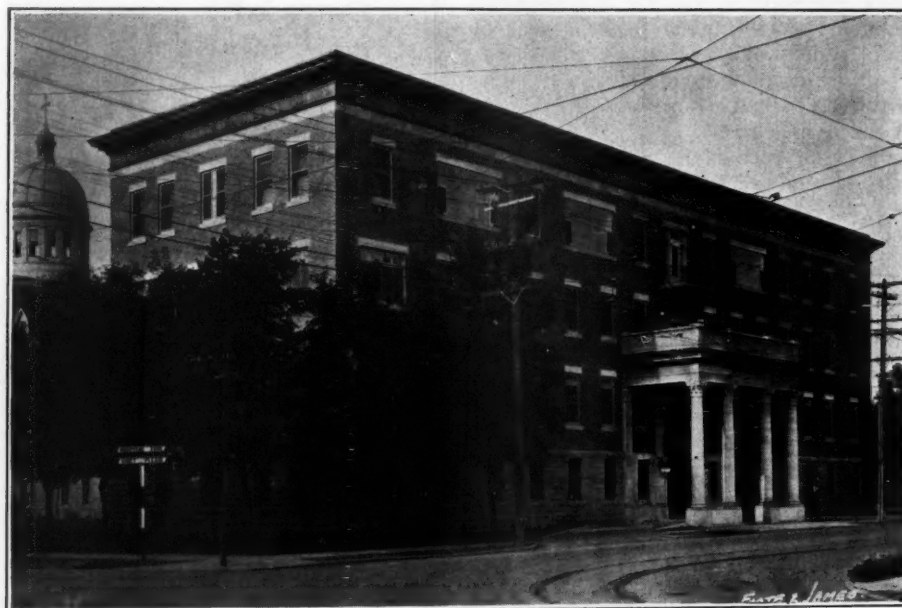
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ELECTRIC FLOOR MACHINE  
*It waxes • It polishes • It scrubs*

Eight models—a right size for every hospital, large or small.

**DUSTBANE PRODUCTS LIMITED**  
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Branches: Montreal, Winnipeg, Vancouver

Please refer to THE CANADIAN HOSPITAL when writing

## THE NEW WING OF MISERICORDIA HOSPITAL



*Adds 75 Beds to Capacity of Hospital*

The new wing of Misericordia Hospital, Winnipeg, erected at a total cost of \$350,000, adds 75 beds to the capacity of the hospital, bringing the total up to 225 beds, and contains a number of new features introduced in Winnipeg for the first time. All casings around doors and windows are of steel and doors and shutters of solid, polished oak. Every floor has its spacious solarium and every floor its blanket warmer and drier.

In the furnishings of the private and semi-private wards, which occupy all of the second and third floors, there is nothing to suggest the sick room. The rooms are *en suite* with bathrooms between, the furniture of all steel in various hardwood finishes. The floors are of brass-trimmed terrazo. Cupboards, cabinets and service rooms, which play an important part in the carrying out of the routine of hospital work, are exceptionally well laid out.

But it is the top floor which is the "crowning glory." This floor is given over entirely to operating theatres and X-ray equipment with auxiliary services and rooms. There are three major operating rooms with the newest designs in operating tables of gleaming nickel. Auxiliary are: an eye room, an ear, nose and throat room, cystoscopic and orthopaedic rooms and sterilizing room. There are also two X-ray machines with a full complement of equipment conveniently placed in adjoining rooms.

On the ground floor are the administrative offices, internes' quarters, including a handsomely furnished sitting room, doctors' waiting room, isolation quarters, laboratory, dispensary and autopsy room.

The new wing fronts on Wolseley Avenue, is built of Tyndall limestone and Claybank red brick, and altogether makes a handsome addition to the former unit. Viau and Venne, of Montreal, were the design-

ers, the construction being carried out by the J. Alber Tremblay company, of Winnipeg. The plumbing, which includes a special equipment providing a service of sterilized water for all dressing and service rooms, was installed by the Standard Plumbing Company, while the contract for the furnishings was in the hands of Simmons, Limited.

Misericordia Hospital first opened in Winnipeg as a maternity hospital in 1898, but branched out into general medicine and surgery in 1916, when a training school for nurses was also inaugurated. In 1922 it received recognition as a "Class A" institution from the American College of Surgeons. Sister Mary, of Calvary, R.N., is the head of the hospital, with Miss A. Laporte, R.N., in charge of the training school of 60 nurses.

The Sisters of Misericordia operate the hospital.

VANCOUVER, B.C.—Preliminary plans for the two proposed General Hospital buildings, a maternity hospital and a private ward block, were approved by the civic building committee on September 6.

The plans, which were recently approved by the General Hospital Board, were submitted to the Committee by City Architect A. J. Bird, under whose supervision they were prepared.

Ratepayers last year voted \$750,000 for construction of these hospital buildings, and General Hospital authorities have applied to the Provincial Government for financial assistance. No reply has yet been received from Victoria.

The private ward buildings will have accommodation for 125 beds, and the maternity hospital for 128. Mr. Bird declared that detailed plans would be completed late in September, which, would constitute a record for preparation of such involved plans.



## The Use and Abuse of Equipment

By PAUL H. FESLER

Superintendent State University Hospital, Oklahoma City

This subject is properly considered under the head of "Chronic Hospital Ills." The chronic patient is always a problem. We try to keep him out of our general hospitals, and when we cannot we endeavour to transfer him to another place. This happens to be one of those "chronic patients" which we can't transfer, and which never dies.

The waste of time, surgical supplies, food and unexpendable equipment has been well discussed. This short paper will deal with the abuse of the buildings and equipment in a general way only. It is impossible to go into details in the time allotted.

In passing the wonderful exhibition on the way to this hall, one is impressed with the fact that everything used in the household, hotel, laundry and many other industries, is necessary in the conduct of the modern hospital, not to mention the expensive technical equipment used only in such an institution.

The abuse of equipment is a problem in any public institution, as the average person connected with such an institution feels little or no responsibility. This is especially true in hospitals, where the professional personnel are only secondarily interested in the equipment, their primary interest being in the diagnosis or treatment of the patient, and the lay personnel are not familiar with the importance of the equipment. For this reason the administrator, having his patient in mind, is sometimes not so exacting as he could be in dealing with those things of less importance than life itself.

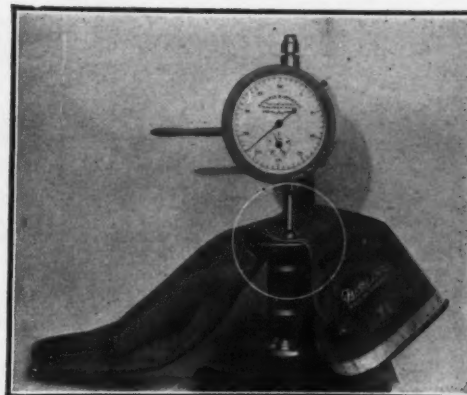
Our hearts ache when we see chairs with marks of washbasins, wheel chairs with the wheels broken by little children coasting down the hill, four or five interns or medical students sitting on a patient's carrier, intended for one person; cigarette snipes left on the dresser by the patient's friends, etc. Of course, active steps are taken to adjust such abuses and then, when we think it is all adjusted, it happens again. I suppose we are interested in how to prevent abuse. The writer does not feel qualified to speak with unlimited knowledge, but will venture the following suggestions.

Not long ago I visited a well-known hospital. The building was more than fifty years old, and as hospitals go is entirely out of date. In this hospital the floors were polished, the walls were bright, the beds were white, in spite of the fact that they had been in use for years, the furniture was all in excellent repair and varnished, the windows were clean, and every piece of equipment ready for use, and showed it had been used. The hospital was crowded, and I found that it was used by all of the reliable members of the profession, and had a waiting list the year round. It was approved by the College of Surgeons. I found that they had a full-time maintenance man, who knew it was his duty to repair every broken glass, light globe or piece of furniture immediately,

From a paper read before the American Hospital Association Convention at Atlantic City, Oct. 29, 1926.

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**ACCURATE, UNIFORM THICKNESS**



Sterling gloves are much thicker than other so-called medium weight gloves. Their soft, flexible texture permits greater thickness without affecting the sense of touch, giving thorough reliability and many more sterilizations in actual service. Sterling Made in Canada Surgeon's Gloves represent the utmost in economy.

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Largest Specialists in SEAMLESS Rubber Gloves  
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is all pure soap  
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An economical  
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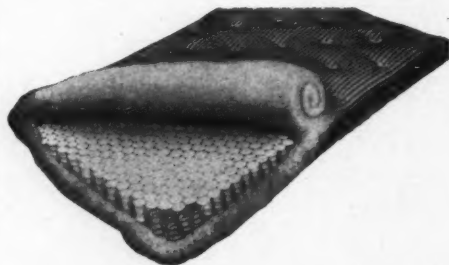
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and the professional men had familiarized him with the use of the technical equipment to an extent where he could make minor repairs when necessary. In this same community there is a new modern fireproof hospital, absolutely up to date from a building and equipment standpoint. It has been in use about a year, but on account of neglect in maintenance it is dirty, the equipment is standing there with no one able to use it, and it is not used by that community. The public will not always recognize waste in supplies, time, etc., but they will not patronize a hospital which shows neglect, regardless of the beautiful building. A maintenance man, with proper supervision, will justify his salary many times, even in small hospitals.

This matter of abuse is worthy of consideration in all administrative councils, as finally the heads of the various departments are the only persons in the hospital able effectively to prevent it, and they are not able to do so, unless they have knowledge of the proper care of the equipment of their departments.

Another important step in the prevention of abuse of equipment is the selection of the equipment. Cheap equipment is usually very expensive. Equipment should not be purchased unless there is a definite need, and it is known that proper use will be made of it by properly trained workers. Simple, well-built equipment, though at the time much more expensive, will stand hospital wear much longer than flimsy, cheap equipment. Hospital equipment is being improved, and is now much stronger than formerly; however, hospitals will not receive the most for their money until this association, through its committees, composed of experts, is able to bring about conditions calling for some sort of standard specifications in hospital equipment. Six or eight inches to the legs of an ordinary institutional bed add a great deal to its value, where it is needed for the hospital. There is some unusual attraction about white enamel.

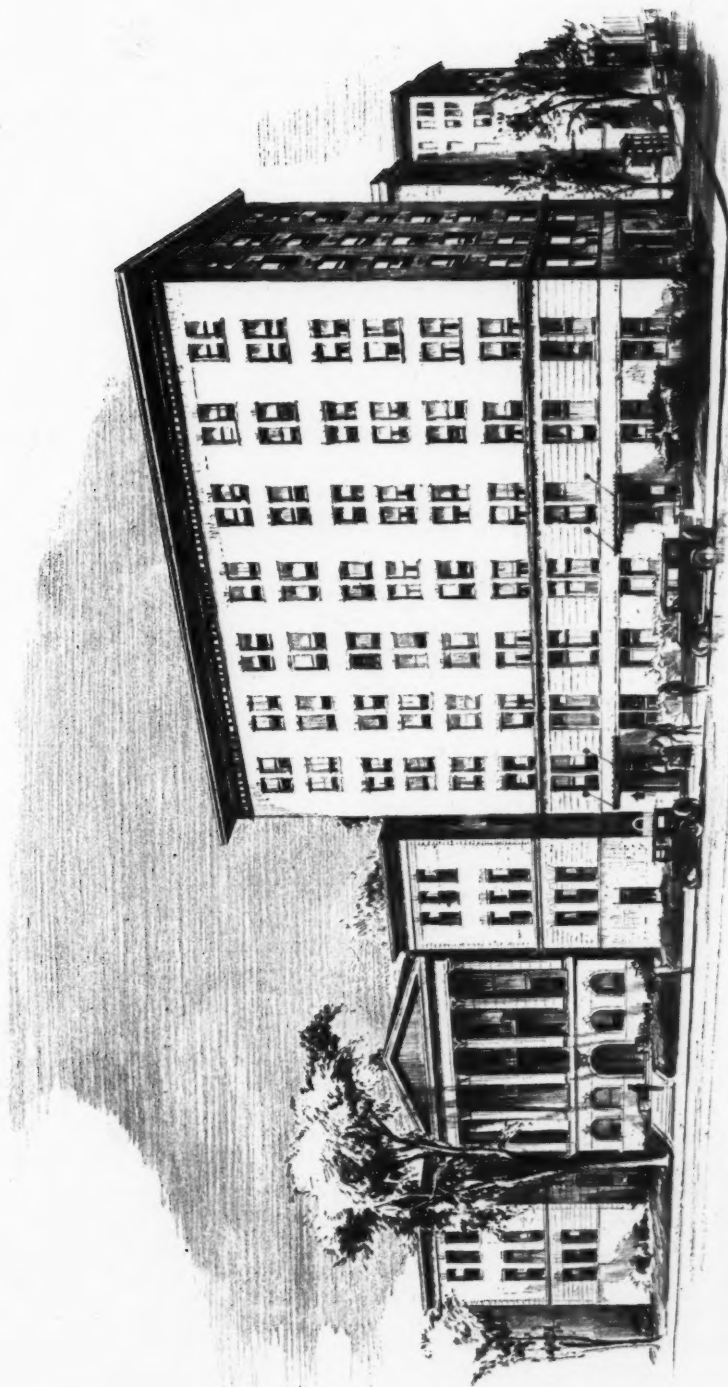
We are familiar with the neglect and abuse of machinery, kitchen equipment, electrical appliances, instruments, and the thousand and one things which are required to equip the modern hospital, but the four things which have most to do with the prevention of abuse are WATER, SOAP, OIL and PAINT, under our old friend, "General Elbow Grease."

### **Miss Mackenzie Leaves Royal Jubilee**

VICTORIA, B.C.—Miss Jessie F. Mackenzie, who was matron of the Provincial Royal Jubilee Hospital for fourteen years, has left for Port Angeles to take up her new duties as superintendent of the Angeles Hospital.

Miss Mackenzie came to Victoria from San Francisco, where she held the position of matron in one of their most prominent hospitals. During her regime the new east wing of the Royal Jubilee Hospital was built and equipped. The directors and medical men signified their appreciation of her work with the gift of a handsome silver tea service and tray, suitably engraved. In her new position, Miss Mackenzie will have complete supervision of a well-equipped institution of 150 beds.

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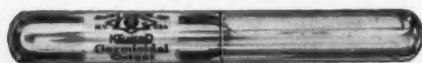
Shelby

*Minneapolis General Hospital*

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## Kalmerid Catgut

**G**ERMICIDAL. Exerts a bactericidal action in the suture tract. Supersedes the older unstable iodized sutures. Impregnated with the double iodine compound, potassium-mercuric-iodide.† Heat sterilized.



The boilable grade is unusually flexible for boilable catgut; the non-boilable grade is extremely flexible.

### TWO VARIETIES

BOILABLE*	NON-BOILABLE
NO.	NO.
1205.....PLAIN CATGUT.....	1405.....
1225.....10-DAY CHROMIC.....	1425.....
1245.....20-DAY CHROMIC.....	1445.....
1285.....40-DAY CHROMIC.....	1485.....

Sizes: 000..00..0..1..2..3..4

Approximately 60 inches in each tube

Package of 12 tubes of a size.....\$3.00  
Less 20% on gross or more or \$28.80, net, a gross

## Claustro-Thermal Catgut

**A**SEPTIC—not germicidal. Sterilized by heat after the tubes are sealed. Boilable.\* Unusually flexible for boilable catgut.

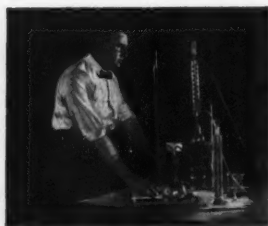


NO.	
105.....	PLAIN CATGUT
125.....	10-DAY CHROMIC CATGUT
145.....	20-DAY CHROMIC CATGUT
185.....	40-DAY CHROMIC CATGUT

Sizes: 000..00..0..1..2..3..4

Approximately 60 inches in each tube

Package of 12 tubes of a size.....\$3.00  
Less 20% on gross or more or \$28.80, net, a gross



D&G Sutures are always found neutral under the most delicate titration tests. This is one of the reasons they uniformly behave well in the tissues.

## Atraumatic Needles

**F**OR GASTRO-INTESTINAL suturing and for all membranes where minimized suture trauma is desirable. Integrally affixed to 20-day Kalmerid catgut. Boilable.\*

Experimental evidence has proven 20-day chromic catgut the most suitable for gastro-intestinal suturing. It has been found that gastric wounds are fully healed within 12 days, and intestinal wounds at 16 days. At these periods the 20-day catgut (regardless of size) still retains, respectively, 60 per cent and 30 per cent of its initial strength.

THEY DO NOT BEND HERE



ILLUSTRATIONS ARE FIVE-EIGHTHS SIZE



STRAIGHT NEEDLES ARE IN ROUND TUBES



CURVED NEEDLES ARE IN FLAT TUBES

NO.	INCHES IN TUBE	DOZEN
1341..STRAIGHT NEEDLE.....	28.....	\$3.00
1342..TWO STRAIGHT NEEDLES...	36.....	3.60
1343..1/2-CIRCLE NEEDLE.....	28.....	3.60
1345..1/2-CIRCLE NEEDLE.....	28.....	3.60

Less 20% discount on one gross or more

Sizes: 00..0..1

Packages of 12 tubes of one kind and size

## Kangaroo Tendons

**G**ERMICIDAL, being impregnated with potassium-mercuric-iodide.† Chromicized to resist absorption in fascia or in tendon for approximately thirty days. The non-boilable grade is extremely flexible.



NO.	
370.....	NON-BOILABLE GRADE
380.....	*BOILABLE GRADE

Sizes: 0..2..4..6..8..16..24

Each tube contains one tendon

Lengths vary from 12 to 20 inches

Package of 12 tubes of a size.....\$3.00  
Less 20% on gross or more or \$28.80, net, a gross

DAVIS & GECK INC. • 211-221 DUFFIELD ST. • BROOKLYN, N. Y.

D&G Sutures are obtainable from responsible dealers everywhere; or direct, postpaid



## Non-Absorbable Sutures



NO.	INCHES IN TUBE	SIZES
350..CELLULOID-LINEN.....	60.....	000, 00, 0
360..HORSEHAIR.....	168.....	00
390..WHITE SILKWORM GUT..	84.....	00, 0, 1
400..BLACK SILKWORM GUT..	84.....	00, 0, 1
450..WHITE TWISTED SILK....	60.....	000 TO 3
460..BLACK TWISTED SILK....	60.....	000, 0, 2
480..WHITE BRAIDED SILK....	60.....	00, 0, 2, 4
490..BLACK BRAIDED SILK....	60.....	00, 1, 4

### BOILABLE

Package of 12 tubes of a size . . . \$3.00  
Less 20% on gross or more or \$28.80, net, a gross

## Short Sutures for Minor Surgery



NO.	INCHES IN TUBE	SIZES
802..PLAIN KALMERID CATGUT..	20..00, 0, 1, 2, 3	
812..10-DAY KALMERID "	20..00, 0, 1, 2, 3	
822..20-DAY KALMERID "	20..00, 0, 1, 2, 3	
862..HORSEHAIR.....	56.....	00
872..WHITE SILKWORM GUT....	28.....	0
882..WHITE TWISTED SILK.....	20.....	000, 0, 2
892..UMBILICAL TAPE.....	24... 1/8-IN. WIDE	

### BOILABLE

Package of 12 tubes of a size . . . \$1.50  
Less 20% on gross or more or \$14.40, net, a gross

## Emergency Sutures with Needles

UNIVERSAL NEEDLE FOR SKIN, MUSCLE, OR TENDON



NO.	INCHES IN TUBE	SIZES
904..PLAIN KALMERID CATGUT..	20..00, 0, 1, 2, 3	
914..10-DAY KALMERID "	20..00, 0, 1, 2, 3	
924..20-DAY KALMERID "	20..00, 0, 1, 2, 3	
964..HORSEHAIR.....	56.....	00
974..WHITE SILKWORM GUT....	28.....	0
984..WHITE TWISTED SILK.....	20.....	000, 0, 2

### BOILABLE

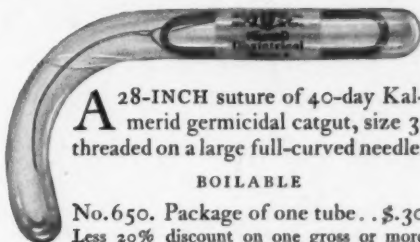
Package of 12 tubes of a size . . . \$2.40  
Less 20% on gross or more or \$23.04, net, a gross

The ash of D&G Sutures is assayed to make sure that no traces remain of uncombined chromium nor of other residues of the chromicizing process.



## Obstetrical Sutures

FOR IMMEDIATE REPAIR OF PERINEAL LACERATIONS



A 28-INCH suture of 40-day Kalmerid germicidal catgut, size 3, threaded on a large full-curved needle.

### BOILABLE

No. 650. Package of one tube . . \$3.30  
Less 20% discount on one gross or more

## Circumcision Sutures



A 28-INCH suture of Kalmerid germicidal catgut, plain, size 00, threaded on a small full-curved needle.

### BOILABLE

No. 600. Package of 12 tubes . . . \$3.00  
Less 20% on gross or more or \$28.80, net, a gross

## Universal Suture Sizes

All sutures are gauged by the standard catgut sizes as here shown

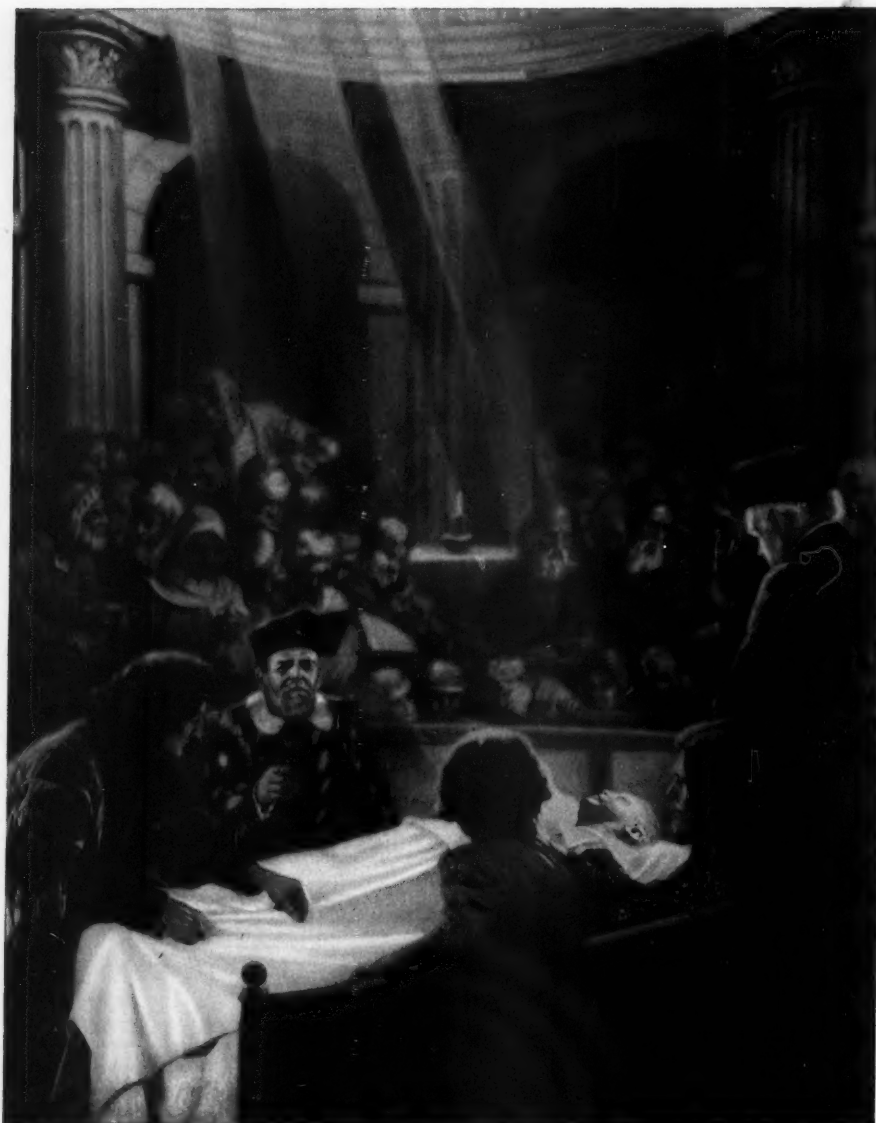
000	4
00	6
0	8
1	16
2	24
3	

\*These tubes not only may be boiled but even may be autoclaved up to 30 pounds pressure, any number of times, without impairment of the sutures.

†Potassium-mercuric-iodide is the ideal bactericide for the preparation of germicidal sutures. It has a phenol coefficient of at least 1100; it is not precipitated by serum or other proteins; it is chemically stable—unlike iodine it does not break down under light and heat; it interferes in no way with the absorption of the sutures, and in the proportions used is free from irritating action on tissues.

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 ab Aquapendente, (1537-1619)  
 famous Venetian anatomist and sur-  
 geon for whom the senate built an  
 anatomic theater to accommodate his  
 many students. He stressed the im-  
 portance of bloodless operations and,  
 like Paré, attained hemostasis by liga-  
 tion. He used linen thread treated with  
 gum of tragacanth in preference to  
 silk, and in some instances "a thread  
 of gold which is flexible, and does  
 not bite and erode the closed parts".

## *D&G Sutures*

"THIS ONE THING WE DO"

DAVIS & GECK INC.

## New Wing for Ottawa General

The contracts for the new wing of the Ottawa General Hospital, Water Street, were awarded on August 22 by Noffke, Morin and Sylvester, architects for the building. The general contract, which is for an amount in excess of \$500,000, goes to H. Dagenais, well known local contractor.

Included in the general contract is that for plumbing, heating and ventilation, which will be done by McKinley and Northwood, and that for the structural steel, which went to the Ottawa branch of the Dominion Bridge Company.

Work on the excavation has commenced. As previously promised by the Sister Superior all contracts went to local firms and it is stipulated in all contracts that local labour be employed. The half million dollar contract price is for building only and all furnishing and equipment will be in addition.

The plumbing and heating contract includes a complete new central heating plant for all existing and future units of the hospital and for the Mother House of the Order. This contract was for about \$100,000.

The sisters and architects have planned to make this new hospital unit one of the most modern in America. It will be erected on the east side of Parent Avenue and will be connected with the present hospital buildings by one central tunnel which will have branches leading to all departments of the hospital.

The building will have a frontage of 237 feet on Parent Avenue and a depth of 96 feet. It will be

five storeys high and so constructed that two additional storeys can be added at any time. The construction will be entirely fireproof with exterior facing of local limestone.

The basement will be entirely devoted to storage space as no room will be required for heating plant.

Patients for every department of the hospital will be admitted at a special ambulance entrance which will be part of the new building. This entrance will be controlled by electric doors. From a nearby admitting room patients can be taken by elevator to any part of the new building, or via the tunnel to the present buildings. To add to the efficiency of this system a new elevator is to be placed in the present building.

*Continued on Page 26*

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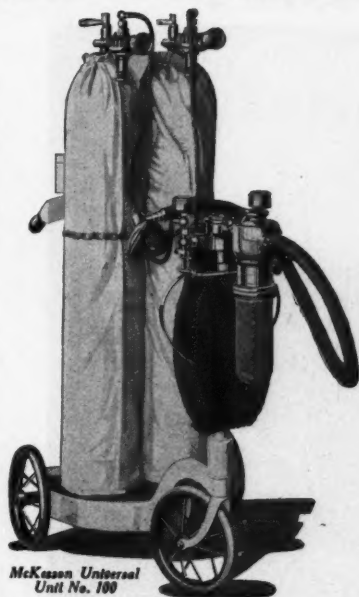
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**Also Nitrous Oxide, Ethylene and Oxygen in any size cylinder.**

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McKesson Universal  
Unit No. 100

## McKesson Anesthetic Apparatus

*Model G*

This apparatus has no limitations, since all modern anesthetics may be administered under positive pressure or without pressure, as the requirements of the case may demand. The elimination of water in the apparatus as an indicator accomplishes this universal adaptability and secures greater accuracy and easier control of the anesthetic.

Fractional rebreathing, which is secured only with this apparatus, is being more appreciated in the last few years for its carbon dioxide effect and conservation of gases than ever before.

Let us send you reprints of important papers on modern anesthetics, oxygen therapy and descriptions of the latest equipment for their administration.

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*Manufacturers of Gas-Oxygen Machines, the Metabolor and Surgical Pump*

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## COLLECTIONS COMMENCED WITH ADMITTANCE

By JOSEPH J. WEBER

Superintendent, Grace Hospital, New Haven, Conn.

Naturally the interest of hospital executives in the subject of increasing hospital collections is in direct ratio to the percentage of the hospital's expenses that must be met by earnings from patients. The subject is of relatively lesser interest to hospitals that are blessed with large endowments, that do a relatively large percentage of charitable work and that do not have excessive private pavilion facilities. The subject is of greater interest to hospitals that have a small endowment and that have a goodly percentage of semi-private and private room facilities.

Grace Hospital, New Haven, Conn., falls in the latter class of institutions, as its annual income yield from invested funds is approximately only \$11,000. Our operating expenses last year were \$367,718 and our corporation expenses, due to the inordinately high bond interest charge, were \$69,506, making a total of \$437,224. Approximately 78 per cent. of this expense, or \$338,969, was paid by earnings from patients treated both in our private pavilion and in the wards. From these figures, it must be evident to all that the prompt and effective collection of our accounts is a matter of outstanding interest to us.

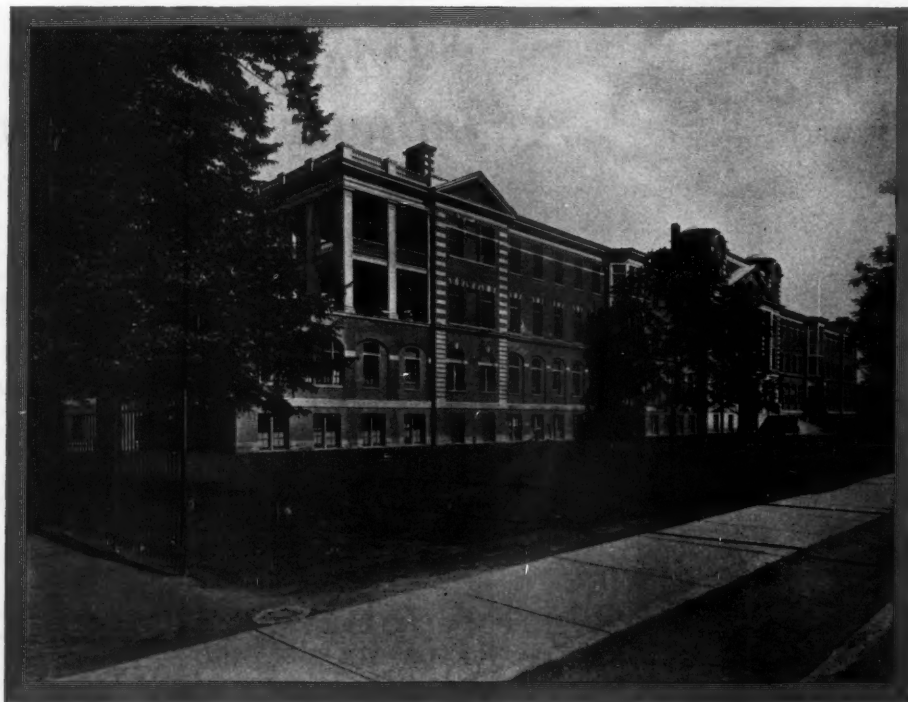
Just as in any line of business, if sales are forced or improper representations relative to merchandise or service are made, collections are harder to make, so we feel that it is a matter of the first importance to

inform our patients, or responsible relatives or friends, as explicitly as possible just what service we render or are likely to be called upon to render and what the expense of this service will be.

As we, in common with most hospitals, have an elaborate schedule of daily rates for hospital service and special charges, it has seemed to us that we could place this information most effectively in the hands of those concerned through the issue of a six-page pamphlet in which services and charges are suitably arranged for ready reference. In instances where reservations are made in advance, as is invariably done in maternity cases, a copy of this leaflet is mailed to the patient or the person who is to be responsible for the patient's bills. In other instances this leaflet is placed in the hands of the individual responsible for the bills at the time the patient is admitted to the hospital. In the latter instance the message of the leaflet is usually supplemented by a word or two of explanation by the admitting officer as to the charges and other requirements for advance payments. At the bottom of the pamphlet's first page attention is called to the fact that the hospital requires payment for one week's hospital service in advance, that accounts are thereafter to be paid weekly in advance upon presentation of the bill and that any balances are to be settled in full upon the discharge of the patient. Attention, furthermore, is called to the fact that overpayments will be refunded promptly.

From a paper read before 1927 Convention, New England Hospital Association and published in the August issue of Hospital Management.

*Continued on Page 30*



*A pleasing view of the Toronto Western Hospital, looking South*



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TORONTO CANADA

*Please refer to THE CANADIAN HOSPITAL when writing*

### New Wing for Ottawa General

*Continued from Page 23*

Also on the ground floor will be a dental department, eye and ear departments, surgical dressing rooms and treatment rooms and two complete operating rooms, in fact everything that goes to make up a complete clinical department. There will also be a hydrotherapy department, a special admitting room for infants and an isolation department where doubtful cases will be admitted.

On the ground floor north wing will be lecture rooms for student nurses and various demonstration kitchens.

In the north wing of the first floor will be a reception room, library and lecture hall for student nurses, room for the superintendent of nurses and some nurses' bedrooms.

The second floor will contain the children's department and rooms for the sisters and nurses.

The third floor will be devoted exclusively to the maternity department and nurses' rooms.

The fourth floor will be given over entirely to the nurses. One elevator will go directly to the roof, which can be used as a roof garden by patients. A second elevator will be for the sole use of the sisters and nurses. Every room in the new building will have mechanical ventilation and all floors will be of terrazzo.

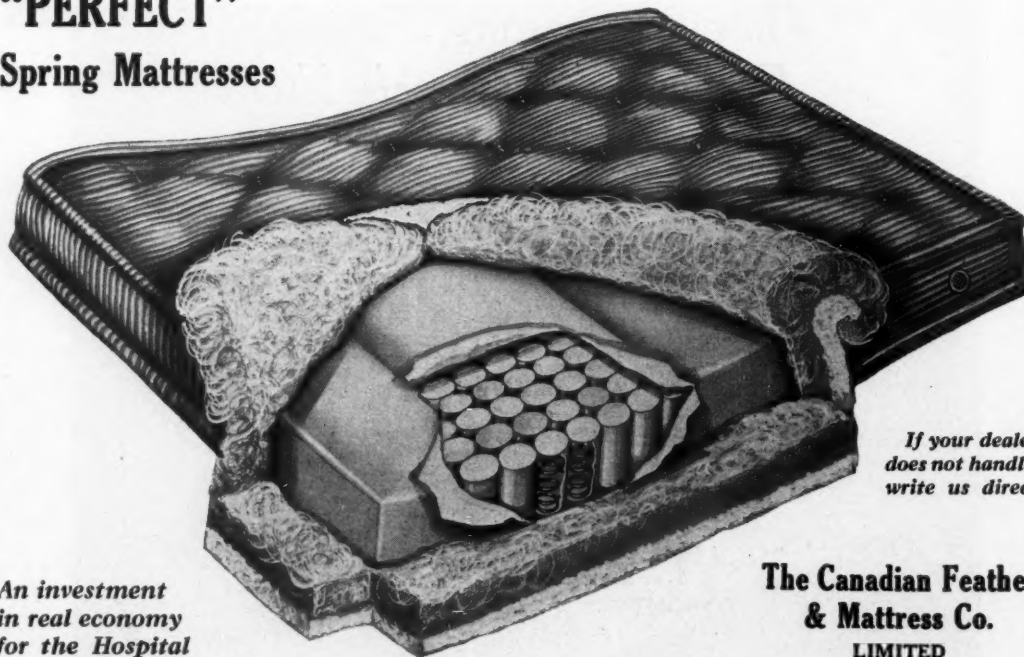
A feature of the children's department will be that the window glass will be of a new material which will allow the violet rays of the sun to enter the rooms.



*Portrait by Milne Studios*

**MISS I. B. SMITH**  
Superintendent  
Wellesley Hospital, Toro

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*An investment  
in real economy  
for the Hospital*

*If your dealer  
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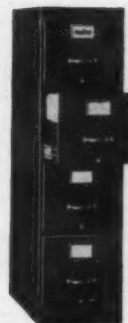
Tell us your filing or record-keeping problem and we will give you the facts on how to solve it most effectively. Complete office equipment service.



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Ask for particulars on our complete line of Steel Files

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## News of Hospitals and Staffs

*A Condensed Monthly Summary of Hospital Activities, Building and Extension Plans and Personal News of Hospital Workers.*

*Editor's Note: Contributions of items for publication in this department will be gladly received. Please address, The Canadian Hospital, 454 King Street West, Toronto.*

LONDON, ONT.—Miss L. Cody, assistant dietitian in the Victoria Hospital, was granted leave of absence without pay, from September 15 until July 1, to complete her studies at Toronto University.

\* \* \*

TORONTO, ONT.—H. H. Angus, consulting engineer, recently installed in Victoria Hospital, London, Ont., the heating system which heats the hospital, nurses' home and children's hospital.

\* \* \*

LONDON, ONT.—Dr. G. G. Clegg, superintendent of the Victoria Hospital, will attend the convention of the American Hospital Association to be held at Milwaukee, October 10 to 15.

\* \* \*

TORONTO.—Miss B. R. Terry, R.N., Toronto nurse, left recently to begin work at the new medical outpost, All Saints' Hospital, Aklavik, Northwest Territory, which has been opened under the auspices of the Mackenzie River Diocese of the Anglican Church.

\* \* \*

WINDSOR, ONT.—After inspecting the Essex County Sanatorium here, Premier Howard G. Ferguson promised an Ontario Government grant of \$50,000 to the institution.

Speaking to Dr. M. R. Graham, superintendent at the institution, Premier Ferguson, said he was surprised, agreeably, that such work was being done in Western Ontario.

\* \* \*

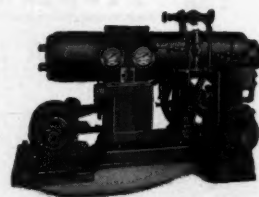
WHITBY, ONT.—Dr. J. M. Forster, superintendent of the Ontario Hospital at Whitby since January, 1920, a period of over seven years, will, on November 4 of this year, complete forty years of service in the various public institutions of the Province of Ontario. Of his own accord he has tendered his resignation to the Provincial Secretary and has been superannuated. He proposes spending the remaining years of his life on his estate at Oakville.

The successor to Dr. Forster is Dr. George Stevenson, a young man who has been assistant superintendent of the Provincial hospital at London, Ont., and who is being promoted by the Government to a much higher post. Dr. Stevenson will take up his duties here about October 1. It has also been announced that Dr. O. G. Lynch, who has been senior physician at the hospital here for some months, and who was on the staff two years ago, has been promoted to the position of assistant superintendent at Brockville, commencing October 1.

KAMLOOPS, B.C.—During the early part of September the nursing staff of the Royal Inland Hospital moved into the new nurses' home. The personnel is delighted with the fine environment and accommodations of the institution. Although all of it is not yet furnished, there are sufficient improvements between the old and the new to suggest greater comfort for a long time.

\* \* \*

ST. CATHARINES, ONT.—Dr. Cecil Shaver, who has had considerable experience in sanitarium work, has taken up duties as medical superintendent of the Consumptive Sanitarium here. He will also conduct T.B. Clinics at St. Catharines, Welland and Niagara Falls, and generally supervise such work throughout the Niagara district. His headquarters are at the local sanitarium. Dr. Shaver was formerly connected with the sanitarium at Hamilton and had also been associated with other similar hospitals.



Most Canadian Hospitals using  
Mechanical Refrigeration  
Have

**"YORK"**  
**ICE MACHINES**

*"The Best Made"*

*Let us send you the names of those nearest you.*

**Canadian Ice Machine Co., Ltd.**

TORONTO

Montreal

Winnipeg

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BELLEVILLE, ONT.—Plans are being prepared for the erection of the new nurses' home in connection with the Belleville General Hospital, with the bequest, which is in the neighbourhood of forty thousand dollars, left by the late Thomas Ritchie at his death six years ago.

\* \* \*

WINDSOR, ONT.—The Essex Border Utilities Commissioners have offered the superintendency of the new Metropolitan Hospital to Miss Caroline Larose, of Galt. She was an applicant some time ago when the post was given to Miss Priscilla Campbell, of Chatham, who subsequently resigned. Differences developed between Miss Campbell and the Hospital Committee of the Commission, it was admitted by Chairman George Hanrahan.

\* \* \*

WINNIPEG, MAN.—In deference to his own wishes, Rt. Rev. Monsignor A. A. Cherrier, P.A., V.G., has been allowed to retire from the pastorate of the Immaculate Conception parish and will take over the duties of chaplain of the Misericordia Hospital. The appointment has been made by His Grace Archbishop Sinnott.

Monsignor Cherrier has been pastor of the Immaculate Conception since 1884.

\* \* \*

HAMILTON, ONT.—Members of the Hospital Board went on record as strongly supporting the move of the local Board of Health to have a by-law passed here to prohibit unnecessary noises. Dr. W. Langrill, superintendent, complained that patients are unable to rest at times on account of the shrieking of train whistles heard in the rear of the General Hospital. He stated that a patient from Toronto had complained to him and also gave the information that the same condition was overcome in Toronto by the adoption of a by-law which is rigidly enforced. According to the information given Dr. Langrill, the Toronto officials had their regulations approved by the Railway Board.

\* \* \*

TORONTO.—Hon. Lincoln Goldie has announced the following appointments in connection with Provincial hospitals:

Dr. George H. Stevenson, assistant superintendent at the Ontario Hospital at London, is appointed superintendent of the hospital at Whitby. The vacancy was created by the superannuation of Dr. J. M. Forster. Dr. James N. Montgomery has been appointed assistant physician at the Ontario Hospital at Hamilton.

Dr. Sidney J. M. Horne has been made senior assistant physician at the Ontario Hospital at Orillia.

Dr. Archibald McCausland is appointed senior assistant physician at the Ontario Hospital at Kingston.

R. S. Graham, storekeeper of the latter institution, has been made bursar.

C. C. Hodgins, former M.P.P., who has been bursar there for years, is superannuated.



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**Surgical Dressings  
Gauze Cotton  
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CANADIAN MADE

**SMITH & NEPHEW**  
LIMITED  
MONTREAL

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## Collections Commenced with Admittance

*Continued from Page 24*

Not only does the matter of informing our patients clearly at the very outset as to the hospital's charges have a definite bearing on collections, but we feel that the quality of the service which we render also has a very definite influence. We try as far as may be, therefore, not to do anything to give our patients an opportunity to plead poor or inadequate service as an excuse for non-payment of their bills. Instances do occur in our institution where, through the negligence or ignorance of some underling, the patient is given cause for just complaint and to that degree makes it harder for the hospital to press for the payment of its bill with the force which properly goes with the consciousness of work well done.

### Obtain Information Early

A considerable amount of preparation for the easy and prompt collection of bills can be made at the time the patient is admitted to the hospital. Information that may prove helpful in collecting the account later can be obtained at this time far more readily than at any other. The exact name and address of the individual responsible for the payment of the patient's bill and, if possible, his telephone number, as well as the name and address of his employer, should be secured at this time. Whether the patient is properly a compensation case or public liability case should be definitely established at the time of the patient's admission or as soon thereafter as possible. In compensation cases the patient's employer and the latter's insurance carrier should be ascertained at once. In public liability cases, the full name and address of the individual responsible for the accident, whether or not he is insured and, if insured, in what company. In some instances it is desired to ascertain tactfully where the individual who signifies a willingness to meet the patient's bill banks his savings.

Just as in business, the interval allowed in the form of credit extended may dull the desire to pay, our experience seems to indicate that the greater the time elapsed after the patient leaves the hospital, the greater is his sense of responsibility for the payment of his hospital bill dulled. Consequently, we have found it eminently satisfactory and profitable in more ways than one to have an assistant to the superintendent, who devotes practically all of her time to the collection of patients' accounts before the patient is discharged from the hospital. Naturally, her constant contact with the patients and their relatives and friends places her in a strategic position to receive and adjust complaints and build up good will for the institution. The ragged edges of her time are often taken up with the preparation of follow-up letters to patients who, for one reason or another, have bills still remaining unpaid, either in part or in full. Occupied with other and often more responsible duties, the superintendent finds her a valuable adjutant.

As already indicated, we ask payment for one week's hospital service in advance. Not knowing what special charges are likely to be incurred during the week, we have not found it expedient to ask for an advance payment of more than the fixed charge of

hospital service. If this advance payment is not made within forty-eight to seventy-two hours, the assistant to the superintendent brings this policy to pay to the attention of the individual responsible in as tactful, yet forceful, manner as possible, with the result that in many instances payment for the first week's hospital services is made before the end of the first week's stay.

At the end of each week's stay, with the exception of maternity cases, which, on an average, do not remain with us quite two weeks, we render a bill covering a two weeks' stay. Needless to say, most of the special charges incurred by patients, such as charges for operating room, X-ray pictures, cystoscopic examinations, laboratory tests, etc., are incurred during the first week's stay of the patient and these, of course, are all included in the itemized bill submitted at the end of the week. Any advance payments made are, of course, included as credits. As already indicated, provision is made for the payment of refunds.

Again at this point, if the patient's bill is not paid within forty-eight to seventy-two hours after being admitted, the assistant to the superintendent gets in touch with the individual responsible for the payment and reminds him of his obligation.

As an essential part of our scheme, our ward supervisors are instructed to notify the main office directly they know a patient has been discharged by his physician. This gives the main office an opportunity to make out the patient's bill in advance of his departure in the event that the patient or his special nurse has not already requested it.

### Required to Sign Note

The hospital expects balances to be settled in full upon the discharge of the patient or if, for any legitimate reason, a bill cannot be paid in full at that time, necessary and desirable adjustments are made and in many instances the person responsible for the bill is asked to sign a note stipulating exactly when he will pay. This note is made out in duplicate. We retain the original copy and give the carbon copy to the maker for reference. The form which we adopted, after careful consideration, reads as follows:

"I, John Jones, being responsible to Grace Hospital for \$90.00 on account of hospital care and treatment of Mary Jones, hereby agree and promise to make payments as follows: \$90.00 in full payment on July 1st or \$100.00 <sup>monthly</sup> <sup>weekly</sup> until paid in full.

Signature.....

Reference.....

Witness....."

The note contains places for the signature of the maker, a witness and for the notation of a reference.

The Rochester General Hospital, Rochester, N.Y., has incorporated a step in their scheme of collection which we have not as yet adopted. Their plan of discharge supplements their plan of admission. A patient may not, upon discharge, leave any floor of the hospital until the supervisor of the floor receives a notification from the cashier. This notification is usually in writing and reads:

"To the Head Nurse, Mary Smith:

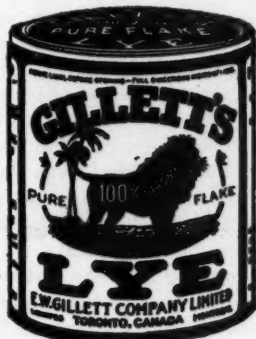
(Continued on page 32)

# Hospital Superintendents

should instruct their Nurses and Domestics  
to use

## GILLETT'S PURE FLAKE LYE

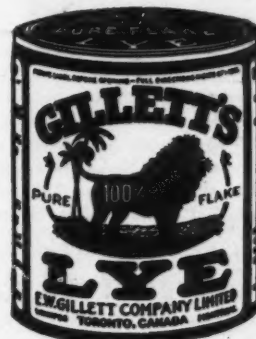
for disinfecting sinks, closets and drains. It is also ideal for the cleansing of urinals and bed pans—in fact, any vessel that requires disinfecting. Gillett's Flake Lye should always be used for scrubbing hospital bath tubs and operating room floors.



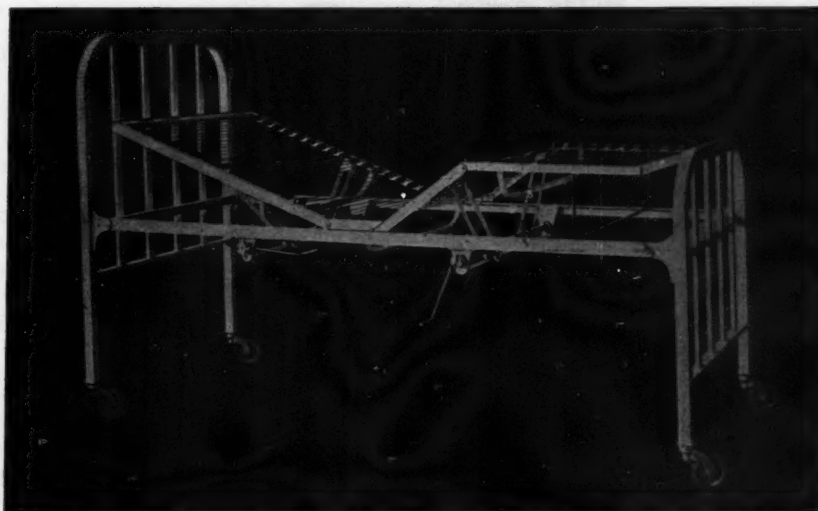
For cleansing and disinfecting, dissolve one teaspoonful of Gillett's Lye in two gallons of water. The fine crystal flakes dissolve instantly in hot or cold water.

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**E. W. GILLETT COMPANY LIMITED**  
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WINNIPEG MONTREAL



## The Walkerite Fowler Bed No. 800



### REAL FEATURES

**Spring Comfort**  
Best sagless spring.

**Easy Working**  
A child can raise and lower it.

**Patented Malleable Corner Lock**

**Very Rigid**

**Equipped with 4-in. rubber-tired castors, adjustable.**

*Write for pamphlet*

## The METAL CRAFT CO., Limited

*Manufacturers of Hospital Equipment*

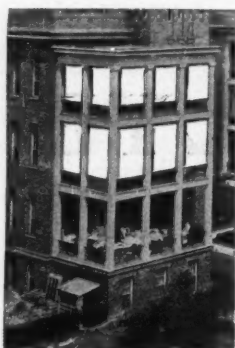
GRIMSBY

ONTARIO

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be Employed Economically with



## GLASS CLOTH

Plain glass stops the healthful violet rays of the sun. GLASS CLOTH admits their passage. It is a specially prepared cloth that has been used successfully for this

purpose during the past twelve years. GLASS CLOTH can be used in place of the ordinary glass in sun porches, etc., at the cost of other common strong fabrics. GLASS CLOTH distributes the light better than glass and retains 40% more heat. Anyone can attach it to the window frames.

Let us give you complete information. Write—

**George Wood Manufacturing**

Sole Glass Cloth Distributors for Canada  
Rebecca St. Dept. 3 TORONTO

### Collections Commenced with Admittance

*Continued from Page 30*

Final arrangements have been made in the business office for the discharge of Mr. Brown.

Signed.....

Cashier."

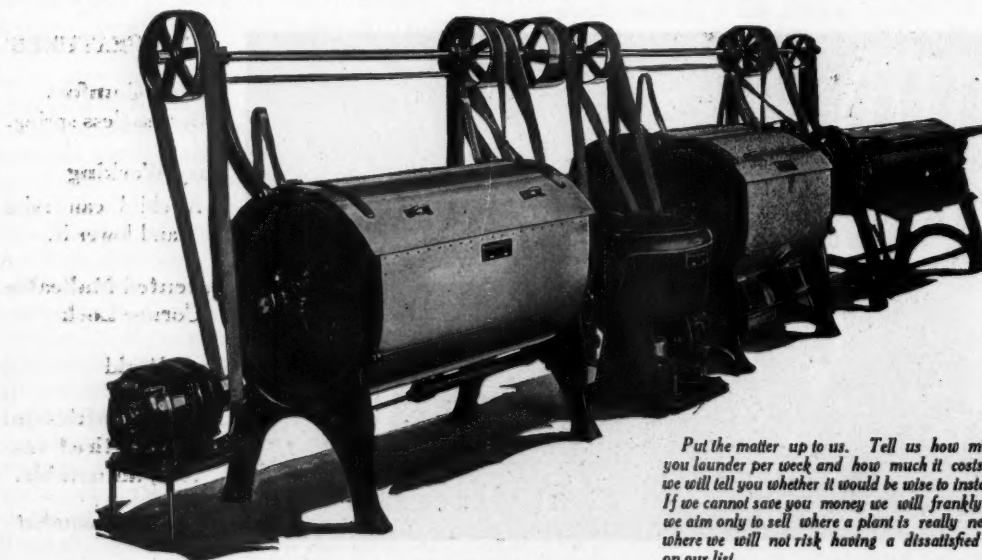
The hospital feels that its chance of getting the bill paid in full if the patient is kept on the floor is greater than under the former plan of bringing the patient to the cashier.

If there is any question in our mind as to the ability of a given patient to hold to his promise to pay, we obtain within twenty-four hours a credit report from the credit bureau of our local Chamber of Commerce with whom we have a contract under which, for the payment of \$100, we are entitled to receive 100 written credit reports or 150 credit reports transmitted over the telephone. These reports serve a valuable purpose in guiding us in our collection efforts.

If a patient leaves the hospital without paying his bill, an itemized copy of which is submitted to him upon his discharge, a statement is sent to him at the expiration of ten days after discharge. Each day a list of the day's discharges dated ten days in advance is placed in the hands of one of the clerks in the main office to guide her in sending out statements.

If within twenty days from the time the statement is sent out, we do not receive a check in full or partial payment of the account or some explanation of why payment is delayed, accompanied by some promise of future settlement, we begin a series of letters which

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MANUFACTURERS

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TORONTO, ONT.

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are sent out at intervals of ten days to two weeks. Not infrequently one or another of these letters will bring some form of response, but if all three are ignored the account is placed in the hands of a collection agency about a month after the third letter of the series has been mailed. The accounts submitted to the collection agency go to them in the form of a list giving the name and address of the patient, person responsible for the payment of the bill with his address, dates of admission and discharge, unpaid balance, amount, if any, which has been paid indicated in red, and any remarks. In the remarks column any data which we have collected that may be helpful to the collection agency is entered. The list is accompanied by all of the correspondence which we have had covering the accounts. For convenient reference, the names on each of these lists are numbered serially and each list bears a code letter indicating the month in which it is compiled.

To aid us in keeping track of our collection efforts, we have devised patients' ledger cards which are filed under a visible index system and which enable us to make a visible record of our collection effort. This patient's ledger sheet contains a carbon copy of the patient's admission data which is often used for reference in our collection effort.

As an illustration of the results which we have been able to achieve, the following schedule of accounts receivable as of May 1st, 1927, for the past six months will be of interest:

Continued on Page 35

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$$\frac{2}{3} + \frac{1}{3} = ?$$

## Not a Problem in Fractions, but the New Formula for "SATIN FINISH"

AT NO increase in price Satin Finish Sizing for coats, aprons, uniforms, etc., have been given newer and bigger advantages . . . more and quicker penetration . . . more flexibility and body . . . greater resistance to perspiration.

Now 2-3 Textile Size and 1-3 Pure Wheat are "Blended in Solution" before drying. This blending process is protected by U.S. Process Patent No. 1406050 and is only used for one other Starch—our famous Satinette, the original combination starch **blended before drying**. This process insures accurate proportioning and uniformity. Use Satin Finish RAW, over the wheel the same as before, but note the great improvement in finishing results.

Free sample furnished to Laundry managers and Hospital superintendents only.

### The KEEVER STARCH COMPANY

Hospital Department

COLUMBUS, OHIO, U. S. A.



BLENDED  
IN SOLUTION

ALWAYS  
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$\frac{2}{3}$  Textile Size +  $\frac{1}{3}$  Pure Wheat

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### CLASSIFIED RATES

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### BUYERS' DIRECTORY RATES

\$4.50 per month on 12 months' order.  
\$5.50 per month on 6 months' order.

### Positions Open

(A) SUPERINTENDENT capable of doing surgical nursing and supervising wanted for 30-bed, general hospital without training school, middle west. City of 4,000. Open salary. (B) Directress of nurses wanted in Illinois hospital of 100 beds. \$125 and maintenance. No. 1549, Aznoe's Central Registry for Nurses, 30 North Michigan Avenue.

INSTRUCTRESS—(A) Experienced, over 30, for southeastern training school, 50 students. \$115 to \$125 depending on ability and experience. Desirable living. (B) Michigan opening near Detroit desires instructress for small training school. \$1,300 year and full maintenance. (C) Instructor, experienced with mental patients desired for excellent institution. Salary about \$100 and maintenance. (D) Eastern 75-bed hospital, city of 120,000, has opening for instructress. Salary open. No. 1550, Aznoe's Central Registry for Nurses, 30 North Michigan Avenue.

SUPERVISORS—(A) New Maine hospital has opening for supervisor of operating and delivery rooms and private floor. Must be trustworthy and good disciplinarian. \$100 and maintenance. (B) Supervisor for private floor wanted in 80-bed hospital; New York registration required. \$100 and maintenance. (C) Michigan opening for operating room supervisor starts at \$100 and maintenance, with chance to work up to \$125. City of 75,000. No. 1551, Aznoe's Central Registry for Nurses, 30 North Michigan Avenue.

WANTED—Situations for accredited graduate nurses, technicians and dietitians; candidates available for every kind of position—from general duty nurse to hospital executive; references investigated always; services gratis to employers. Medical Bureau, Marshall Field Annex, Chicago.

### Situations Wanted

CANADIAN DIETITIAN—(a) Age 23, over a year's experience as assistant, desires similar opening, Canada preferred. Reasonable salary. (b) B.S. Columbia, age 28, about six years' experience as Hospital Dietitian and Instructor of Nutrition and Dietetics, available for appointment. Will start at \$100 and maintenance. No. 1521, Aznoe's Central Registry for Nurses, 30 North Michigan, Chicago.

### Jewett Training School for Nurses

BUSHWICK HOSPITAL, BROOKLYN, N.Y.  
Registered with New York State. Thirty-month course to young women having one year high school or equivalent. \$15-\$25 allowance made after preliminary period. Write for catalogue.

### Blankets

BLANKETS FOR HOSPITALS—"If it's blankets, buy the Skelton Brand." We specialize in hospital blankets and sell direct from the mills. Get better quality blankets at lower prices. Hundreds of prominent hospitals are our customers. Write for miniature samples and prices. Skelton Woollen Mills Company, 47 King St. West, Toronto.

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DIPLOMAS—ONE OR A THOUSAND—Illustrated circular B mailed on request. Ames & Rollinson, 206 Broadway, New York, N.Y.

### Schools of Instruction

WOMAN'S HOSPITAL IN THE STATE OF NEW YORK, West 110th St., New York City (155 gynecological beds, 50 obstetrical beds).

Affiliations offered to accredited training schools for three months' courses in obstetrics.

### POST-GRADUATE COURSES

Six months in gynecology, obstetrics, operating room technic, clinics and ward management. Three months in obstetrics. Three months in operating room technic and management, Theoretical instruction by attending staff and resident instructor. Post-graduate students receive allowance of \$15 monthly and full maintenance.

Nurse-helpers employed on all wards. For further particulars address, Directress of Nurses, Woman's Hospital.

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**ACME-INTERNATIONAL X-RAY EQUIPMENT  
IS EVIDENCED BY THE CHARACTER OF  
CANADIAN INSTITUTIONS WHICH  
HAVE CHOSEN IT.**

*Sold, Installed and Satisfactorily Serviced by*

**THE M. B. EVANS X-RAY CO.**

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**DETROIT**

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## OBITUARY

### Thomas R. Hanley, M.D.

A noted medical man and prominent sportsman passed away in Toronto on September 1 in the person of Dr. Thomas R. Hanley, of 124 Bloor Street West and 12 Lawrence Crescent.

In sport the late Dr. Hanley made a name for himself in his earlier days in the fields of lacrosse and hockey. In medicine his specialty was anaesthesia, and he was a member of the Societies of Anaesthesia of Ontario, America, England, Ireland and Austria. The late Dr. Hanley had many friends in several countries of the world which he had visited on a lacrosse tour and during the post-graduate studies which he pursued after graduating in both arts and medicine from the University of Toronto.

In addition to post-graduate work in the Toronto General Hospital and the Manhattan Maternity Hospital of New York, Dr. Hanley worked in hospitals in England and Vienna. An authority on anaesthesia he had studied this branch of medical science in London, England, and Vienna, and in the United States in New York, Cleveland and Madison, Wisconsin.

### Isabel Gilroy

Miss Isabel Gilroy, daughter of Mr. and Mrs. A. W. Gilroy, 1149 Twenty-Ninth Avenue West, Vancouver, was instantly killed in an automobile accident at Aberdeen, Wash., on August 30.

Miss Gilroy, who was a graduate of the Vancouver General Hospital last year, was assistant superintendent of the Aberdeen Hospital, a position she was offered after her graduation with honours here.

She was born at Springhill, Nova Scotia, and was educated at Acadia Seminary. She came to Vancouver with her parents in 1919, and later entered the hospital for training. Her cheerful disposition, kindly nature and ability in her profession won for her a wide circle of friends.

### Flora Madeline Shaw, R.N.

Miss Flora Madeline Shaw, R.N., of Montreal, president of the Canadian Nurses' Association, and one of the most prominent members of the nursing profession in Canada, passed away on August 27 in Liverpool, England. Miss Shaw was elected president of the Canadian Nurses' Association during its convention in Ottawa just a year ago.

Miss Shaw was the directress of the McGill School of Graduate Nurses, assuming charge on its foundation in 1920. Her appointment as president of the Canadian Nurses at the convention in Ottawa last year was a most popular one, she succeeding Miss Browne of Toronto. This distinguished nurse went abroad in June in order to represent the nurses of Canada at the interim conference of the International Council of Nurses held at Geneva in July.

A graduate of the Montreal General Hospital, Miss Shaw achieved unusual distinction in her profession. For a time she was assistant to the late Miss Livingston, lady superintendent of the Montreal

General Hospital. In addition to her nursing training, Miss Shaw held a teaching diploma from Columbia University. At one period she was instructor in dietetics at the Presbyterian Hospital, New York.

Miss Shaw was a member of the Executive Council of the Victorian Order of Nurses of Canada, and a member of the Board of Management and Advisory Nursing Committee of the local V.O.N. She took an active part in securing legislation regarding registration of nurses in this province some years ago.

Miss Shaw was a native of Ontario, being a daughter of the late Henry Dowsley Shaw, of Perth, who was a member of a well-known family of that district.

### Collections Commenced with Admittance

*Continued from Page 33*

	Earned Incomes	Unpaid Balances	Per Cent. Averages
November.....	\$22,942.78	\$699.18	.0304
December.....	25,187.17	2,908.50	.1154
January.....	28,170.11	2,174.11	.0771
February.....	27,779.11	2,509.33	.0903
March.....	31,210.62	4,943.79	.1184
April.....	32,000.00	5,282.22	.17

The efficiency of any plan of collection depends very largely upon the intelligence of the persons who carry it out. Certain exceptions to the rules must of necessity be made from time to time and only a person of judgment with a fine sense of relative values can be entrusted with the responsibility of determining when exceptions may properly be made. We do not, of course, ask physicians or members of their families for advance payments, nor do we ask it of well-known persons of unquestioned financial standing in the community.

## FOODS and BEVERAGES

*Serve Your Patients with*

## BEEKIST HONEY

The choicest selection of Ontario's Honey rigidly graded and inspected. It contains all the elements necessary to the building and nourishing of the human system.

**Ontario Honey Producers Co-Operative  
LIMITED**

47 Wellington St. East - Toronto, 2, Ont.

## LA PERLE

PURE FRENCH OLIVE OIL

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HALIFAX MONTREAL WINNIPEG CALGARY VANCOUVER

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**JOHN MADDOCK & SONS, LTD., ENGLAND**  
We specialize in Institutional Equipment and  
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### SPECIALIZE IN KITCHEN EQUIPMENT

Insulated Food Conveyors, Permanent and Portable Steam  
Tables built to your specifications by skilled mechanics to  
conform to the high standard of excellence always associated  
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you estimates.



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ICE MACHINE CO. LTD. TORONTO  
DOMESTIC, APARTMENT HOUSE &  
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MONTREAL

## Sterling Rubber Company Markets Products in Every Part of Empire

For many years Sterling Rubber Gloves have been  
used exclusively by thousands of Canadian physicians,  
surgeons and nurses who have come to depend upon  
the uniform high quality of these well-known products.

It is interesting to learn that Sterling Gloves are  
now being sold in increasing quantities in every part  
of the British Empire, many of them being used by  
the various government departments where the hos-  
pitals are supplied with their requirements by the  
Government.

More than 36 per cent. of their output is now being  
exported from Canada. This export business enables  
them to run their plant continuously day and night,  
and in this way reduce the cost of production to a  
minimum, thereby giving the trade the advantage of  
low prices, which would not be possible were they to  
depend only on requirements of the Canadian trade.

At the present time the Sterling Company is ex-  
perimenting with various changes which they have  
under close observation and which are, in some cases,  
being tried out in actual service. They have made it  
a point to keep in touch at all times with every de-  
velopment tending to a more serviceable or depend-  
able product, or any method which might enable  
them to produce their products at a lower cost without  
affecting their high quality.

The Sterling Rubber Company manufactures a  
complete range of surgical gloves, nurses' gloves,  
drainage tubing, finger cots and any special  
shapes which can be produced by the seamless rubber  
process.



Display of Sterling Rubber Co., Limited, at Wembley, 1925-26,  
at which their products won highest honours.

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### A New Type X-Ray Machine

The Acme-International X-Ray Company of Chicago, Illinois, have recently released a new type of x-ray machine which incorporates many notable and desirable improvements. The rectification of the high tension currents is by the well-known Ball & Toroid Coronaless Construction developed and patented by this company six years ago. The new machines incorporate a transformer of new design employing double primary coils and four secondaries. This results in a transformer which is so thoroughly attuned in all its factors that it delivers approximately double the amount of x-rays at the tube. For this reason the machine has been christened the Super-High-Speed 150 K.V.



The machine is built to deliver 150 kilo-volts peak and has a maximum radiographic range of 500 milliamperes at 90 K.V. The Precision Super-High-Speed characteristics make it possible, it is said, to cut all established techniques in half. Half the exposure time, or half the milliamperes. To govern the machine, a new auto-transformer was designed by Acme-International engineers. This auto-transformer has one hundred points of contact. Each auto button raises the voltage in the primary by one volt, in the secondary by 1,000 volts, or 1/10 inch equivalent spark gap. This ratio runs true at either high or low milliamperes. Another feature which appeals to experienced Roentgenologists is the fact that the milliamperage remains constant over a range of penetration values from 60,000 volts to 100,000 volts. In x-ray therapy it is claimed that this machine demonstrates similar amazing improvements over previous practice.

A machine of this type is being installed at the Royal Ottawa Sanatorium, where it will be used in making ultra-rapid radiography in chest examination.

The Acme-International X-Ray Company manufactures an extensive line of high-grade x-ray and diathermy apparatus and in addition to the Super-High-Speed X-Ray Generator mentioned above, a new Horizontal Motor-Driven Plate-Changer and a new Cabinet Type Diathermy Generator of remarkable capacity at a popular price has been recently announced.

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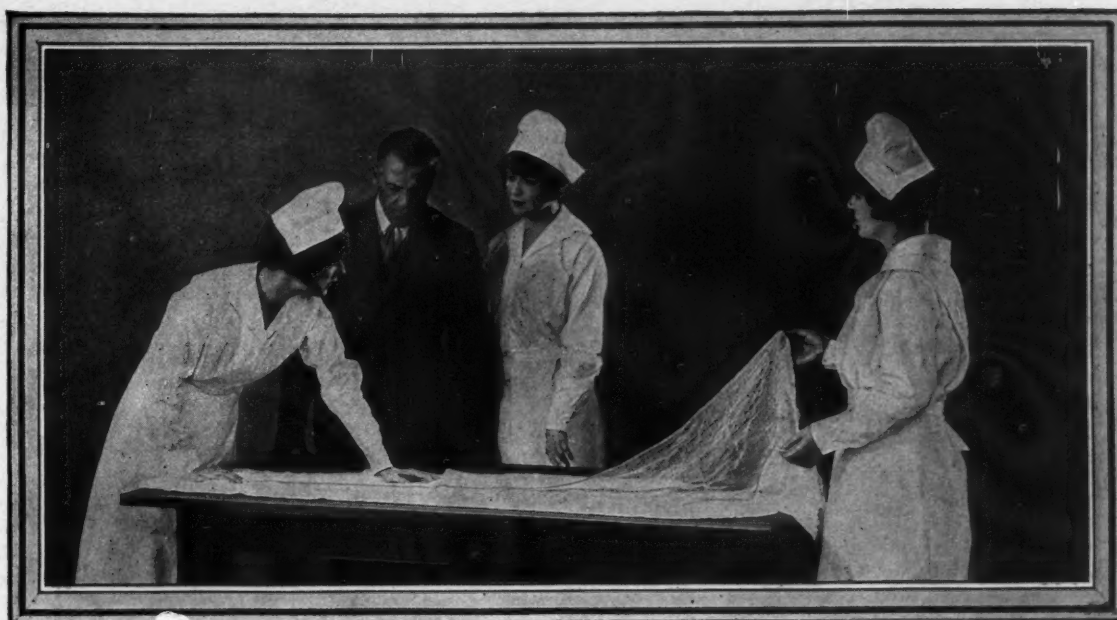
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### Montreal Women's General Hospital

*Continued from Page 15*

on the most economical basis, while securing the best quality of all material and equipment. The low cost of \$600,000, or \$3,000 per bed, has been achieved, this taking into account the price of the land. To date the hospital has raised sufficient money to erect the building, but is still short of the \$100,000 needed to completely equip it. It is hoped that various women's organizations will see fit to equip rooms, as has been done already by the Montreal Women's Club with a special donation of \$500. Every room so equipped will have on the door a bronze plate perpetuating the name of the organization.

The medical board consists of Dr. A. Bercovitch, chairman; Dr. H. L. Reddy, secretary-treasurer and medical superintendent; Dr. W. Burnett and Dr. F. E. Thompson. The architect is J. Sawyer, and the contractors Church, Ross & Company.



## “Why must you work overtime...doing this?”

### *How ready-made dressings smoothed out the daily routine in one hospital*

The superintendent of a large general hospital returned one night after regular hours. Passing through the hospital he noticed a light in the dressings room. There he found the dressings-room superintendent and two day nurses,—still working.

For a while, he watched. They were making dressings—cutting and folding, folding and cutting.

He said: “Why must you work overtime ... doing this?”

The superintendent of nurses answered: “We have a busy day ahead tomorrow and we’ll need lots of dressings.”

He said: “But couldn’t you have made them during the day?” She said: “Impossible! Not with a schedule in the operating room like we had today!”

He said: “Then there’s no way to avoid this condition?”

She answered: “I don’t know. I wish we could get our dressings ready-made.”

He said: “Maybe we can. I’ll investigate!”

\* \* \*

He investigated. And found that he could get

nearly all his dressings in ready-made or partially-made forms.

A free test, conducted in his own hospital by a Curity salesman, convinced him that ready-made dressings not only eliminated overtime on busy days. In addition, their use promoted much smoother routine throughout the whole hospital.

Also he found that ready-made dressings eliminated tedious drudgery for the nurses, made possible a direct, economical control of supplies, and, in the long run, saved the hospital a very appreciable amount of money.

The nine products which Lewis now offers in finished or partially finished forms are: Ready-Cut Gauze, Dressing Rolls, Surgical Sponges, Sliced Bandage Rolls, Bandages, O. B. Pads, Kotex, Combination Rolls and Cellucotton Absorbent Wadding Ready-Cut.

To hospital executives we shall willingly send samples of any or all of these products. Or your Curity salesman, reached at a branch office, will gladly show them to you and demonstrate their many advantages. Simply mail a post-card.

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